

Plumbing Affidavit

Michigan Department of Labor & Economic Growth
Bureau of Construction Codes & Fire Safety
Plumbing Division
P.O. Box 30254
Lansing, MI 48909
517/241-9330

Initial Affidavit Certificate Fee: \$67.00

Authority: 2002 PA 733	The Department of Labor & Economic Growth will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.
Completion: Mandatory	
Penalty: Permit will not be issued	

Note:

- The acceptance of this form by the state plumbing board does not qualify for the issuance of a plumbing contractor's license.
- An affidavit must be submitted to the department annually.
- **The original wall and pocket license of the MASTER PLUMBER who will represent the employer listed below must be submitted with this request along with a completed Master Plumber Change in Contractor Representation application, if applicable.** Upon issuance of the affidavit certificate, the master plumber license will be updated and reissued to reflect the name of the employer and returned to the licensee. Retain a copy of this application and the master plumber license until the license and certificate are received.
- In those instances where business or industrial procedure requires the regular employment of a full-time licensed master plumber, a licensed master plumber shall be authorized to secure permits for installations of plumbing on the premises owned or occupied and used by the business provided the licensed master plumber physically supervises the plumbing work and represents only the business or industrial employer.

Employer's Statement

AFFIDAVIT CERTIFICATE NUMBER - OFFICE USE ONLY			
NAME OF COMPANY		NAME OF COMPANY OFFICER (Printed)	
BUSINESS ADDRESS		COUNTY	
CITY	STATE	ZIP CODE	TELEPHONE NUMBER ()
<p>It is understood that the employer and the licensed master plumber are responsible for exercising the supervision and control of the plumbing operations necessary to secure full compliance with the act and all other laws and rules related to the installation of plumbing in this state. Notice of termination of employment of the master plumber listed below will be given promptly to the Department and plumbing installation will be discontinued until a master plumber is employed and a new affidavit form is filed.</p> <p>I have read the foregoing and certify that this company will comply with the above statements.</p>			
OFFICER'S SIGNATURE			DATE

Licensed Master Plumber's Statement

NAME OF MASTER PLUMBER		TELEPHONE NUMBER ()	
HOME ADDRESS			
CITY	STATE	ZIP CODE	COUNTY
CURRENT LICENSE NO.			DATE ISSUED
<p>I understand that plumbing installation on the premises of my above employer shall conform to the act, rules, and the Michigan Plumbing Code.</p> <p>I am presently employed as a full time licensed plumber by the company listed above. I do not represent any other person or company as a supervising master plumber and I will promptly notify the Department of any changes in this written affidavit.</p>			
LICENSED MASTER PLUMBER'S SIGNATURE			DATE

FOR OFFICE USE ONLY
Batch No. 4 ____ 120
Keypunch Date ____/____/____